

COMMISSIONER FOR PATENTS
Box Patent Application
Washington, D.C. 20231

"Express Mail" Mailing Label Number EL 373208472 US

Date of Deposit April 2, 2001

I hereby certify that this transmittal letter and the papers referred to as being enclosed therein are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, Box Patent Application, Washington, DC 20231.

Nelson Barros
Signature
Nelson F. Barros
Please Print Name of Person Signing

Sir:

Transmitted herewith for filing is the patent application of

Inventor(s): **Michael R. Hufford, David Peterson, Jean A. Paty, Saul Shiffman**

For: **SYSTEM FOR CLINICAL TRIAL SUBJECT COMPLIANCE**

Enclosed are:

- ☐ This is a request for filing a ☐ continuation ☐ divisional application under 37 CFR 1.53(b), of pending prior application serial no. _____ filed on _____ entitled _____.
- ☒ 22 pages of specification, 11 pages of claims, 1 page of abstract.
- ☒ 5 sheets of drawings (Figures 1-5).
- ☒ An *unexecuted* Declaration, Petition and Power of Attorney.
- ☐ An assignment of the invention to _____ . A recordation form cover sheet (Form PTO 1595) is also enclosed.
- ☒ Applicant claims small entity status. See 37 CFR 1.27.
- ☐ Other _____

The filing fee has been calculated as shown below:

	(Col. 1)	(Col. 2)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
FOR:	NO. FILED	NO. EXTRA	RATE	FEE		RATE	FEE
BASIC FEE	////////////////////		////////	\$ 355	OR	////////	\$
TOTAL CLAIMS	53 - 20	= 33	x 9=	\$ 297	OR	x 18=	\$
INDEP. CLAIMS	25 - 3	= 22	x 40	\$ 880	OR	x 80	\$
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS PRESENTED			+135	\$	OR	+270	\$
			TOTAL	\$1532.00	OR	TOTAL	0

* If the difference in Col. 2 is less than zero, enter "0" in Col. 2.

- ☒ Please charge my Deposit Account No. 12-0080 in the amount of \$ \$1532.00.
A duplicate copy of this sheet is enclosed.
- ☐ A check in the amount of \$ to cover the filing fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 12-0080.
A duplicate copy of this sheet is enclosed.
- ☒ Any additional filing fees required under 37 C.F.R. 1.16.
- ☐ Any patent application processing fees under 37 C.F.R. 1.17.


- ☒ The Commissioner is hereby authorized to charge payment of the following fees during the pendency of this application or credit any overpayment to Deposit Account No. 12-0080.
A duplicate copy of this sheet is enclosed.
- ☒ Any patent application processing fees under 37 C.F.R. 1.17.
- ☐ The issue fee set in 37 C.F.R. 1.18 at or before mailing of the Notice of Allowance, pursuant to 37 C.F.R. 1.311(b).
- ☒ Any filing fees under 37 C.F.R. 1.16 for presentation of extra claims.
- ☐ A check in the amount of \$ _____ to cover the recording of assignment documents is also enclosed.
- ☒ Address all future communications (May only be completed by applicant, or attorney or agent of record) to Kevin J. Canning, Esq. at **Customer Number: 000959** whose address is:

Lahive & Cockfield, LLP
28 State Street
Boston, Massachusetts 02109

Date: April 2, 2001

LAHIVE & COCKFIELD, LLP
Attorneys at Law

By


David J. Ridders
Reg. No. 43,882
28 State Street
Boston, MA 02109
(617) 227-7400
Telecopier (617) 742-4214